

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	SAC	64931	1/21/89
O.I.P.E. CLASSIFIER		64931	1/27/89
FORMALITY REVIEW	EW	64931 64934	8 99 10 27 89

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)... Canceled  
 ÷ ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
1	1	1	1/20/89
2	1	1	
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10	✓	✓	=
11	N		
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20	N		
21	✓	✓	=
22	✓	✓	=
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If more than 150 claims or 10 actions  
staple additional sheet here